FORM NLRB-501 (3-21)

UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD **CHARGE AGAINST EMPLOYER**

DO NOT WRITE IN THIS SPACE		
Case	Date Filed	
12-CA-312828	2/22/2023	

INSTRUCTIONS:

	which the alleged unfair labor practice occurred or is oc	curring.
	OYER AGAINST WHOM CHARGE IS BROUGHT	
a. Name of Employer Columbia Food Service Company, Inc. dba Ulele		b. Tel. No. (813) 999-4952
		c. Cell No.
		f. Fax. No.
d. Address (Street, city, state, and ZIP code) 1810 N Highland Ave Tampa, FL 33602	e. Employer Representative Jeffrey C. Shannon (b) (6), (b) (7)(C)	g. e-mail
		h. Number of workers employed Apprx 50
i. Type of Establishment <i>(factory, mine, wholesaler, etc.)</i> Restaurant	j. Identify principal product or service Food Service	
The above-named employer has engaged in and is engaged (list subsections) practices are practices affecting commerce within the me meaning of the Act and the Postal Reorganization Act.	of the National Lal	bor Relations Act, and these unfair labor
2. Basis of the Charge (set forth a clear and concise state I was terminated for discussing my pay. I informed was being fired for discussing my hourly wage. It work is not in the handbook either." After termination.	d other employees of my pay. Then I was cal old that there was no policy against it and ting me for discussing my wages even told	led in by (b) (6), (b) (7)(C) and told that I (b) (6), (b) (7)(C) at
3. Full name of party filing charge (if labor organization, g (b) (6), (b) (7)(C)	ive full name, including local name and number)	
4a. Address (Street and number, city, state, and ZIP code) (b) (6), (b) (7)(C)		4b. Tel. No.
		4c Cell No (b) (6), (b) (7)(C)
		4d. Fax No.
		4e. e-mail (b) (6), (b) (7)(C)
5. Full name of national or international labor organization	n of which it is an affiliate or constituent unit (to be fille	ed in when charge is filed by a labor organization)
6. DECLARATION I declare that I have read the above charge and that the statements are true to the best of my knowledge and belief.		Tel. No.
(b) (6), (b) (7)(C)	(b) (6), (b) (7)(C)	Office, if any, Cell No. (b) (6), (b) (7)(C)
(signature of representative or person making charge)	(Print/type name and title or office, if any)	Fax No.
(b) (6), (b) (7)(C) Address	Date Feb 21, 2023	e-mail (b) (6), (b) (7)(C)

WILLFUL FALSE STATEMENTS ON THIS CHARGE CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001) PRIVACY ACT STATEMENT

Solicitation of the information on this form is authorized by the National Labor Relations Act (NLRA), 29 U.S.C. § 151 et seq. The principal use of the information is to assist the National Labor Relations Board (NLRB) in processing unfair labor practice and related proceedings or litigation. The routine uses for the information are fully set forth in the Federal Register, 71 Fed. Reg. 74942-43 (Dec. 13, 2006). The NLRB will further explain these uses upon request. Disclosure of this information to the NLRB is voluntary; however, failure to supply the information may cause the NLRB to decline to invoke its processes.